

The Youth Advisory Council (YAC) was developed to give high school students the opportunity to gain valuable knowledge about government, provide meaningful input, enhance their leadership skills and contribute to their community by effecting positive change and impacting the lives of others. YAC members are encouraged to participate in all aspects of planning and implementation of their programs and activities, such as setting agendas, holding positions, role playing and running meetings. The Youth Advisory Council was created to give the youth in our district a voice within the Congresswoman's office. The students selected will influence the mission, goals, and direction of the YAC program.

Program Expectations

- Attend all Youth Advisory Council meetings online via Microsoft Teams, Zoom, and/or in person (when safe and appropriate)
- Participate in training(s) and community events
- Be open minded and willing to work with their peers
- Communication and Collaboration.

Time commitment

- One-year term
- Attend at least 5 of the 6 annual Microsoft Teams/Zoom meetings
- Attend at least 5 of the 6 in person events (when safe and appropriate)

Attendance Policy

The success of this program depends on each student's commitment to participating in every monthly meeting, being punctual, participation in trainings/community events, and their willingness to lead and make a difference.

Application Process

- The YAC application will be available on the Congresswoman's website: shontelbrown.house.gov; The last date to submit your application for consideration is on October 14, 2022.
- The applicants that are selected to become a member of the Youth Advisory Council will be notified by October 21, 2022.

Application Guidelines

All applications will remain confidential. YAC does not discriminate based on sex, race, religion, national origin, or disabilities.

Applicants must reside or attend school in the 11th District of Ohio. If you are not sure if you reside in the district, please visit www.house.gov and use the “find your representative” link that is in the top right corner of the webpage.

Eligible applicants must be:

- Enrolled in the 11th or 12th grade in a traditional high school that is in OH-11.
- Students (age 16-19) that are enrolled in non-traditional high school programs, job training programs or working towards their GED
- 1-year commitment
- Must have a computer and internet access
- Students must provide their own transportation to activities, meetings, trainings, and events.
- Only those applications that have been completely filled out will be considered
- A completed application consists of:
 - Application form
 - Short answer responses
 - Student agreement form
 - Authorization to use image form
 - Resume
 - Two letters of recommendation.

Parental Consent for Minors (Under 18 years old)

Dear Parent/Guardian:

With your permission, your child wishes to participate in the Eleventh Congressional District of Ohio's 2022/2023 Youth Advisory Council. This Youth Advisory Council will provide leadership training, dialogue about issues such as community safety, education, and youth rights; as well as empower them to propose viable solutions to address these issues and exciting opportunities for your child to participate in community engagement. All Youth Advisory Council meetings, trainings, and/or activities will be supervised by the Eleventh Congressional District of Ohio's staff. This form is to verify that you are aware of the attendance policy and program requirements. You are responsible for reading this information in full before signing this form.

Please keep a copy of the application as a reference. ALL APPLICATIONS WILL REMAIN CONFIDENTIAL.

I give permission for my child: _____ to participate in the Eleventh Congressional District of Ohio Youth Advisory Council and all related activities.

Please initial and sign below:

- ☐ I understand my child must complete and pass a criminal background check.
- ☐ I am aware that my child, if selected, must attend at least 80% of the Youth Advisory Council meetings (either in person or via Microsoft Teams/ Zoom), events or programs.
- ☐ I understand failure to consistently participate in Youth Advisory Council meetings and/or events can result in dismissal from the Youth Advisory Council.
- ☐ I understand that it is vital that my child, if selected, check and respond to Youth Advisory Council emails/ calls in order to be aware of all meetings and news.
- ☐ I am aware it is the responsibility of my child to find transportation to and from their preferred worksite location.

Parent/Guardian Name (Please Print): _____

Parent/Guardian Phone Number: _____

Parent Address: _____

Parent/Guardian Email: _____

Parent/Guardian Signature

Date

Authorization to Use Image

I consent to my minor child's/ or my (applicable to independent minors) photograph being taken or image recorded in connection with Congresswoman Shontel M. Brown's Eleventh Congressional District Youth Advisory Council and its activities. Furthermore, I authorize the use or release for publication of my child's name, image and/or voice as may be captured by photography, video or audio recording while attending or participating in activities associated with the Youth Advisory Council, in any medium, for any purpose, including illustration, promotion, marketing or advertisement.

Child's Name (Print): _____

Child's Date of Birth (MM/DD/YYYY): _____

Parent's/ Guardian Name (Print): _____

Parent's/ Guardian Signature

Date

Child's Signature

Date

Student Application & Responses:

Congresswoman Shontel M. Brown
Ohio's Eleventh Congressional District
Youth Advisory Council Application

Student Application

Name: _____

Date of Birth: _____

Address: _____

City, State, Zip _____

School/ Program: _____

Grade Level: _____

School District: _____

Home Phone Number: _____

Mobile Phone Number: _____

Email Address: _____

How did you hear about Congresswoman Shontel M. Brown's Youth Advisory Council?

☐ Website

☐ Social Media (Facebook, Instagram, Twitter, etc.)

☐ School

☐ Other

What activities, responsibilities **organizations, commitments** are you **OR** have you been involved with **at school and/or outside of school?** Please list clubs, roles, AP classes, extracurricular activities, sports, volunteering, work programs, employment or religious activities.

Based on your knowledge of YAC, why do you want to serve on Congresswoman Brown's Youth Advisory Council?

What are some challenges facing students today? How would you resolve these challenges?

OPTIONAL: Do you have additional documents you would like to include as part of your application? You may submit "brag sheet", certificates/recognition, videos, artwork, or other examples of your work.

Congresswoman Shontel M. Brown
Ohio's Eleventh Congressional District
Youth Advisory Council Recommendation

Applicant's Name: _____

Applicant's School _____ Grade _____

Does applicant demonstrate strong leadership skills?

☐ Yes ☐ No

Does applicant demonstrate strong communication skills?

☐ Yes ☐ No

Is applicant able to think critically about challenges and resolutions to challenges?

☐ Yes ☐ No

What else would you like us to know that was not reflected in the questions?

I recommend this applicant to the Youth Advisory Council ☐ Yes ☐ No

Reviewer's Name: _____

Reviewer's Title/Position: _____

Reviewer's Signature

Date